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completed where appro	priate All further correst	ondence incl	uding the Pate	ent advance orders and n	FEE (if required). Blocks 1 totification of maintenance ck 1, by (a) specifying a ne	fees will be mailed to
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21876 7590 09/10/07				of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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APPLICATION NO.	FILING DATE	FIRST NAMED I			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/619,740	07/14/2003		Atul K	. Puri	07844-594001	7020
TITLE OF INVENTION: RE	NDERING COLOR IMAGES	AND TEXT				
APPLN. TYPE	SMALL ENTITY	ISSU	E FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440		\$0	\$1440	12/10/2007
EXAMINER AF		ART	UNIT	CLASS-SUBCLASS	1	
HILLERY, NATHAN 21			76	715-528000	•	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). [] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorney or agent) and the names of up to 2 registered registering that the property of the property o			
[] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			agent) and the names of up to 2 registered patient attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PILEASE NOTE: Unless an assignees is identified below, no assignee data will appear on the pattert, Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAMED of ASSIGNEE						
Adobe Systems Incorporated San Jose, CA						
Please check the appropriate assignee category or eategories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government						
4a. The following fee(s) are enclosed: X Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit eard. Form PTO-2038 is attached. Payment by credit eard. Form PTO-2038 is attached. X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 36:0150. (enclose an extra copy of this form).			
Change in Entity Status (from status indicated above) J.a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7. [Jb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.2.7.(g)(2).						
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(Authorized Signature)	> M			(Date) / Z /	7/2007	
Typed or Printed Name I			Registration No. 50,222			
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